

**APPENDIX H - REMITTER INFORMATION**  
**SCHOOL BUS OPERATOR'S PERMIT**  
(EXAMPLE)

NAME OF DISTRICT  
OR CONTRACTOR: \_\_\_\_\_

NAME OF CONTACT PERSON \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
City State Zip Code

TELEPHONE NUMBER (    ) \_\_\_\_\_

NUMBER OF SCHOOL BUS OPERATOR'S  
PERMIT APPLICATIONS SUBMITTED: \_\_\_\_\_

AMOUNT ENCLOSED: \_\_\_\_\_

(NOTE: This form should be used when submitting multiple applications for the permit. All correspondence regarding refunds, rejects, denials, all temporary permits and regular permits will be mailed to the contact person listed above.

Please ensure that the city, state and zip code are included. The payment enclosed must be sufficient to cover all applications for permits included. The Department of Revenue charges 10% of the face amount for all returned checks.)